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UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO EASTERN DIVISION

IN RE:

Vickie L. Siegel,

Case No. 15-50733

Chapter 13

Debtor. : Judge Preston

NOTICE OF SUBMISSION OF AMENDED SCHEDULES I & J

Now comes Debtor, Vickie L. Siegel, by and through counsel, and submits the attached Amended Schedule I – Your Income, and Schedule J – Your Expenses.

Respectfully submitted,

/s/ Crystal I. Zellar

Counsel for Debtor

Crystal I. Zellar (#0038785) Shelley E. Hibburt (#0091736)

Zellar & Zellar, Attorneys at Law, Inc.

720 Market Street Zanesville, Ohio 43701 Telephone: (740) 452-8439 Facsimile: (740) 450-8499 mail@ZellarLaw.com

CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing <u>Notice of Submission of Amended Schedules I & J</u> was served (i) **electronically** on the date of filing through the court's ECF System on all ECF participants registered in this case at the email address registered with the court and (ii) by **ordinary U.S. Mail** on **November 15, 2016** addressed to:

Vickie Siegel 471 Sierra Circle E Largo FL 33770

/s/ Crystal I. Zellar

Crystal I. Zellar (#0038785) Shelley E. Hibburt (#0091736) **Zellar & Zellar, Attorneys at Law, Inc.**

Counsel for Debtor

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Fill in this information to identify your ca	ise:		
Debtor 1 Vickie L. Sieg	jel		
Debtor 2 (Spouse, if filing)			
United States Bankruptcy Court for the	SOUTHERN DISTRIC	CT OF OHIO	
Case number 2:15-bk-50733			Check if this is:
(If known)		-	An amended filing
			A supplement showing postpetition chapter 13 income as of the following date:
Official Form 106I			MM / DD/ YYYY
Schedule I: Your Inco	ome		12/15
Part 1: Describe Employment 1. Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,		■ Employed	☐ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
employers.	Occupation	1099 employee	
Include part-time, seasonal, or self-employed work.	Employer's name	Medical Benefits Mutual	
Occupation may include student or homemaker, if it applies.	Employer's address	1975 Tamarack Rd Newark, OH 43058	
	How long employed to	here?	
Part 2: Give Details About Mon	thly Income		
Estimate monthly income as of the da spouse unless you are separated.	ate you file this form. If	you have nothing to report for any	line, write \$0 in the space. Include your non-filing

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

		For Debtor 1		ebtor 2 or iling spouse
2.	\$	1,282.00	\$	N/A
3.	+\$	0.00	+\$	N/A
4.	\$	1,282.00	\$	N/A

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	Vickie L. Siegel	-	Case	e number (if known)	2:15	5-bk-50733	
	Con	y line 4 here	4.	Fo \$	r Debtor 1 1,282.00		r Debtor 2 or n-filing spous	se J/A
	COP	y line 4 nere	4.	Ψ_	1,262.00	- Ψ_		N/A
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	0.00	- \$_		N/A_
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00			N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	—		N/A
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	—		\ /A
	5e. 5f.	Insurance	5e. 5f.	\$_ \$	0.00			1/A
	51. 5g.	Domestic support obligations Union dues	5g.	\$ \$	0.00	- ' -		<u>N/A</u> N/A
	5h.	Other deductions. Specify:	5h.⊣	: -	0.00			<u>√A</u> √A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	0.00	- · _ \$		√/A
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ \$	1,282.00	- '-		√/\ √A
		all other income regularly received:	٠.	Ψ_	1,202.00	- Ψ_		<u> </u>
8.	8a.	Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$_	0.00		N	I/A
	8b.	Interest and dividends	8b.	\$_	0.00	_ \$_		√A_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		I/A
	8d.	Unemployment compensation	8d.	\$-	0.00	—		1/A
	8e.	Social Security	8e.	\$	0.00			J/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		_		_		
	_	Specify:	8f.	\$_	0.00	- \$_		√A
	8g.	Pension or retirement income	8g.	\$ ₋	1,461.00			\ \/A
	8h.	Other monthly income. Specify:	8h.+	+ \$ __	0.00	+ >_	N	<u>\/A</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,461.00	\$_		N/A
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		2,743.00 + \$		N/A = \$	2,743.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			<i>,</i>			
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depen		•	·		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$_	2,743.00
								nbined nthly income
13.	Do y	ou expect an increase or decrease within the year after you file this form	?					,
		No.						
	П	Yes. Explain:						

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Fill	in this information to identify your case:				
Deb (Spo	otor 1 Vickie L. Siegel otor 2 ouse, if filing) ted States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO		■ A		ving postpetition chapter the following date:
Cas	se number 2:15-bk-50733 (nown)		•	, 25, 1111	
	fficial Form 106J				
Be a	chedule J: Your Expenses as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fo mber (if known). Answer every question.				
Par 1.	Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses form	or Separate Housel	nold of Debto	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you? No Yes No Yes No Yes No Yes No Yes No
3.	Do your expenses include expenses of people other than yourself and your dependents?				Li Tes
Est exp	tt 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your enses as of a date after the bankruptcy is filed. If this is a supple plicable date.	u are using this fo emental <i>Schedule</i>	rm as a sup <i>J</i> , check the	plement in a Cha box at the top o	pter 13 case to report f the form and fill in the
the	elude expenses paid for with non-cash government assistance if ye value of such assistance and have included it on <i>Schedule I: Yo</i> fficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.	clude first mortgage	4. \$		508.00
	If not included in line 4:				
E	 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 	o ogrija le za z	4a. \$ 4b. \$ 4c. \$ 4d. \$		0.00 0.00 0.00 0.00
5.	Additional mortgage payments for your residence, such as hom	ie equity ioans	5. \$		0.00

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ebtor 1	Vickie L. Siegel	Case number (if k	(nown) <u>2:15-bk-50733</u>
14:1:4	sion:		
6. Utilit 6a.	ties: Electricity, heat, natural gas	6a. \$	275.00
6b.	Water, sewer, garbage collection	6b. \$	126.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	150.00
6d.	Other. Specify:	6d. \$	
	· · ·		0.00
	d and housekeeping supplies	·	225.00
	dcare and children's education costs	8. \$	0.00
	hing, laundry, and dry cleaning	9. \$	34.00
	sonal care products and services	10. \$	60.00
	lical and dental expenses	11. \$	460.00
	nsportation. Include gas, maintenance, bus or train fare.	12. \$	150.00
	not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	ritable contributions and religious donations	13. \$ 14. \$	
	•	14. Ф	0.00
5. Insu			
	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a. \$	0.00
	Health insurance	15a. \$	0.00
		· —	
	Vehicle insurance	15c. \$	47.00
	Other insurance. Specify:	15d. \$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	46 (444.00
	cify: Income Taxes	16. \$	111.00
	allment or lease payments:	170 ¢	207.00
	Car payments for Vehicle 1	17a. \$	367.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other. Specify:	17c. \$	0.00
	Other. Specify:	17d. \$	0.00
	r payments of alimony, maintenance, and support that you did not report		0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 10	\$	
e. Othe Spec	er payments you make to support others who do not live with you.	Ψ <u> </u>	0.00
	er real property expenses not included in lines 4 or 5 of this form or on 5		eomo.
	Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$ —	
		20b. \$ 20c. \$	0.00
	Property, homeowner's, or renter's insurance	· —	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
	Homeowner's association or condominium dues	20e. \$	0.00
1. Othe	er: Specify: Pet Food & Vet Bills (4 dogs)	21. +\$	40.00
2. Calc	culate your monthly expenses		
	Add lines 4 through 21.	\$	2,553.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106.	_	2,000.00
		\$	2.552.00
22C.	Add line 22a and 22b. The result is your monthly expenses.	🏓 –	2,553.00
3. Calc	culate your monthly net income.		
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,743.00
	Copy your monthly expenses from line 22c above.	23b\$	2,553.00
	•		
23c.	Subtract your monthly expenses from your monthly income.		100.00
	The result is your monthly net income.	23c. \$	190.00
	•		
	you expect an increase or decrease in your expenses within the year after		
	example, do you expect to finish paying for your car loan within the year or do you expec fication to the terms of your mortgage?	t your mortgage paymen	it to increase or decrease because of a
■ N			
\square Y	'es. Explain here:		